PATHWAYS TO WELLNESS AND SUSTAINABILITY

Strategic Plan for the Prince Edward Island Health and Social Services System - 2001-2005

December 2001

- West Prince Health Region
- East Prince Health Region
- Queens Health Region
- Southern Kings Health Region
- Eastern Kings Health Region
- Department of Health and Social Services

Prince Edward Island

Health and Social Services System

Strategic Plan

for the Prince Edward Island Health and Social Services System

2001-2005

West Prince Health Region • East Prince Health Region • Queens Health Region
• Southern Kings Health Region • Eastern Kings Health Region
Department of Health and Social Services

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Minister's Message

It is my pleasure to introduce this strategic plan which will be used over the next three to five years to guide the direction of our health and social services system, which includes the Department of Health and Social Services and the five Regional Health Authorities.

While it is important for all parts of the system to work together towards common goals, it is also vital that we work together with others to create environments that support good health. We hope this plan will support the development of new and stronger partnerships among government sectors and communities to improve the health and independence of Islanders.

The plan was drafted based on consultations with regional board members, MLA's and senior staff. Broader consultations were then held with employees, physicians, partner groups and the public.

Generally, response to the draft plan was very positive. There was strong support for the goals, and most issues raised during the consultations were similar to those issues identified in the plan.

Consultation participants suggested the system move forward quickly in several key areas: to provide citizens with tools and knowledge to take more responsibility for their own health; to invest in healthy child development; to maximize the use of the knowledge and skills of existing providers; and to build stronger partnerships with non-government organizations, the education sector, and sectors with responsibility for environmental protection and employment.

The public expressed the need for care in reallocating resources, and the need to keep people informed and involved in these processes. They want to be assured that the special needs of women, children, seniors and low income families will continue to be addressed. Non-government organizations have asked for a stronger role in the development of policy and practice. Finally, the system was asked to be mindful of the overwhelming public support for a sustainable publicly funded and publicly administered health and social services system.

Government is committed to making meaningful improvements within our system. We acknowledge that our success will depend on the availability of adequate federal funding to meet increasing costs. Additionally, it will depend on our ability to remain committed to our three guiding principles which are: to maintain a primary focus on wellness and children's health; to be accountable; and to ensure that our system is sustainable for us and for future generations.

We are most grateful to the Regional Boards and the many others who participated, and provided advice and support to make this a system strategic plan. We now look forward to working in partnership with Island communities towards its successful implementation.

Jamie Ballem

Honourable Jamie Ballem
Minister of Health and Social Services

Executive Summary

The Ministry of Health and Social Services is a very large and complex system of integrated services that protect, maintain and improve the health and well being of Islanders. Economic, cultural and scientific changes can have a major impact on our health, and on our service delivery system. This plan identifies many of these issues, and provides a framework to support coordinated system-wide planning to address changing needs.

The continued sustainability of the system is a primary concern. Spending on health and social services has grown rapidly in recent years to 42 percent of total provincial government program expenditures. At this rate of growth, spending could reach 50 percent of overall spending within the next five years. The availability of health professionals is also affecting our ability to sustain services. The plan identifies goals and strategies to support continued access to quality services, now and in future.

We are also concerned about the high rate of chronic conditions in our province. Conditions such as chronic heart and lung disease, cancer, diabetes, and mental illness are the major causes of death and disability, yet many of these conditions are preventable or manageable. To improve health status, the system will increase its emphasis on a wellness approach. Wellness initiatives will assist Islanders to increase acceptance of responsibility for their health and reach their full health potential. This will be achieved through community partnerships to promote healthy lifestyles and reduce risk factors for chronic disease, and through increased access to primary health services that support disease prevention and management.

Current research suggests that how children learn, behave, form relationships, and enjoy good health in later life is very dependent on how they are nurtured in the prenatal period and their very early years. However, the greatest proportion of health expenditures are currently allocated to the last few months of life. The system will provide leadership to the implementation

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of a provincial healthy child development strategy, based on increased investments in healthy child development and partnerships to ensure that all Island children receive a healthy start in life.

Recruitment, retention and human resource planning will remain a priority to ensure an adequate supply and appropriate mix of health and social services professionals to meet changing needs. Retention initiatives will be supported by comprehensive workplace wellness programs to promote organizational excellence, positive personal health practices, and safe and positive workplaces.

Public confidence in the system will be increased through improved accountability. Indicators of system performance, health status, and progress to address the determinants of health will be measured and reported regularly. By improving public awareness and understanding of performance and outcomes, Islanders will have a better sense of how their tax dollars are spent and whether value for money is being achieved. They can then have a greater role in shaping priorities and improving how resources are allocated.

Access to services will be improved through enhancements in the way services are organized, how people are referred to them, and how health professionals work together to deliver them. Investments will be made in primary health services recognizing that these opportunities have a far greater impact to assist people to prevent and manage health problems rather than after the onset of serious illness. Recognizing that the incidence of cancer and chronic conditions is expected to rise as the population ages, access to specialty services such as Magnetic Resonance Imaging (MRI) and cancer treatment services will be provided within the province.

A provincial Health Information Technology Strategy will be implemented to support the planning, implementation and management of information technology to improve health status, service delivery, and evidence based decision making.

This strategic plan identifies several areas where we want to significantly improve our results. Our goals are to improve health status, increase acceptance of responsibility for health, improve sustainability, increase public confidence in the system, and improve workplace wellness and staff morale. Our ability to achieve these goals is largely dependent on our ability to be accountable, to embrace innovation in service delivery, to reallocate resources to areas of greatest need, and to work together as a system in partnership with Islanders to improve health and the sustainability of the system.

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The Determinants of Health

Prince Edward Island shares the World Health Organization view that health is more than the absence of illness. It is a resource for everyday life.

Good health is determined by many factors such as income, education, gender, early childhood experiences, and many other factors which lie outside the health and social services system.

For example, people are healthier when they have a secure job and feel the work that they do is important. Education provides people with the knowledge and skills they need to make healthy choices. Women are healthier when they are supported in their roles as mothers and caregivers. How children learn, form relationships and enjoy good health in later life is very dependent on how they are nurtured in the prenatal period and their early years.

The mission of the Health and Social Services System is to promote, protect and improve the health and independence of Islanders. This mission is achieved through the provision of quality diagnostic and treatment services; social services which help people meet their basic needs; public health services which prevent illness and the spread of disease; programs to prevent and manage chronic conditions; and initiatives which engage other sectors and communities to address the broad determinants of health.

While the traditional role of the health and social services system has been to provide quality services, there is a growing recognition that more can be gained by working with others to address the factors that cause people to become ill or reliant on the system to meet their needs.

Responsibility for health is shared among individuals, families, communities and other sectors. Planning for the health and social services system must involve improving the way services are organized and delivered, as well as how the system works with others to increase acceptance of responsibility for health.

How do we define health?

Health is not simply the absence of illness. Health depends on many things such as the food we eat, the environment we live in, our income, housing, how active we are and our family characteristics. Health is a resource for everyday life that enables individuals and communities to meet their needs.

— World Health Organization

What determines health?

- *Personal health practices and coping skills*
- *Healthy child development*
- *Education*
- *Employment and working conditions*
- *Health services*
- *Income and social status*
- *Social environments*
- *Physical environment*
- *Biology and genetic endowment*
- *Gender*
- *Culture*

— Health Canada

Overview of the Health and Social Services System

Mission

The mission of the health and social services system is to promote, protect and improve the health and independence of Islanders.

Prince Edward Island has a publicly administered and publicly funded health system that guarantees universal access to medically necessary hospital and physician services required by the Canada Health Act. Many other health and social services are funded in whole, or in part, by the provincial government.

The system includes a wide range of integrated health and social services such as acute care, addictions, mental health, social assistance and housing services. Some specialty services are accessed within the regional health care system such as cardiac surgery and neurotrauma services.

Facilities

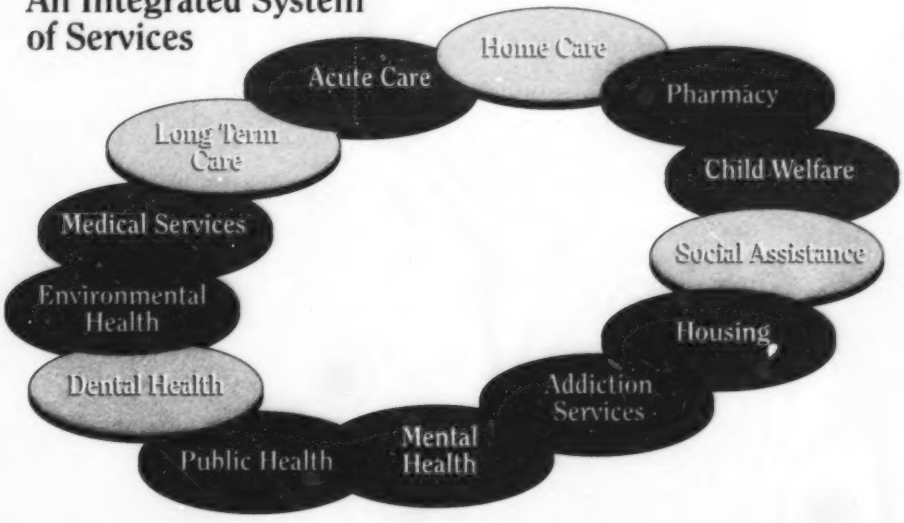
PEI has two referral hospitals and five community hospitals, which have a combined total of 474 beds. Along with seven government manors which house 564 long term care nursing beds, Islanders have access to an additional 407 beds in private nursing homes. The system also operates several addictions and mental health facilities, 1178 seniors housing units, and 460 family housing units.

A new 40-bed provincial addictions facility, and a new provincial Cancer Treatment Centre were opened in 2000. Construction of a new $50 million health facility will be completed in Summerside in 2003. (Computed Tomography (CT) scanning and a wide range of diagnostic imaging services are available at the referral hospitals, and new linear accelerator and MRI services are now being established.

Human Resources

The public sector health and social services workforce includes approximately 4,000 employees. Prince Edward Island has 200 health care professionals per 10,000 residents compared to the national average of 182 per 10,000.

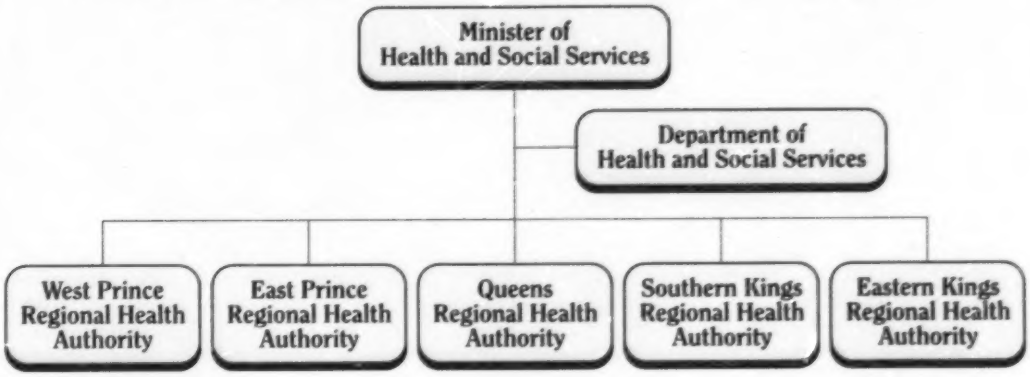
An Integrated System of Services



Structure

The system includes the Department of Health and Social Services and five Regional Health Authorities, which are governed by Regional Health Boards. The Department works with the Regional Health Authorities to establish system goals and objectives, develop policy and outcome standards, and allocate resources. The Regional Health Authorities plan and deliver core programs and services to meet system standards.

Prince Edward Island Health and Social Services System


Minister of Health and Social Services
Department of Health and Social Services
West Prince Regional Health Authority
East Prince Regional Health Authority
Queens Regional Health Authority
Southern Kings Regional Health Authority
Eastern Kings Regional Health Authority

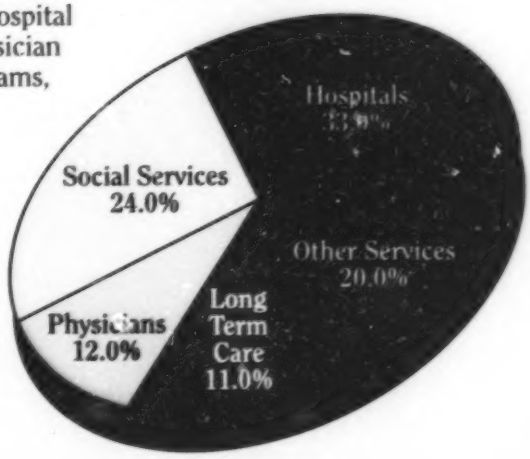
Financial Resources

During the past ten years, annual provincial spending on health and social services increased from $250 million to more than $353 million, an average increase of about three percent per year. Increased costs are due to inflation, population growth, new technologies, and the increasing use of services by all age groups.

Major health and social services expenditures are allocated to: Hospital Services, 33%; Social Services, 24%; Long Term Care, 11%; Physician Services, 12%; and other services such as Provincial Drug Programs, Public Health Nursing and Addiction Services, 20%.

Combined public and private sector spending per capita is $2,516 per year, compared to the Canadian average of $2,700. Spending as a percentage of provincial gross domestic product is the second highest in the country at 11.7 percent.

Expenditures



Overview of the Strategic Plan

The purpose of this strategic plan is to guide the direction of the health and social services system over the next three to five years. It will provide direction for regional and departmental operational planning, as well as the allocation of resources.

The plan identifies changes in the external environment, and examines pressures on the internal capacity of the system to address changing conditions. The goals and strategies were developed to improve health and the sustainability of the system within the context of these changing needs and conditions.

Principles

Planning is based on three guiding principles:

Wellness
Our primary focus will be on wellness and children's health.

Sustainability
We will allocate resources appropriately to respond to changing needs and ensure continued access to quality programs and services.

Accountability
We will measure and report our performance and health outcomes.

Environment Scan — *What is affecting our health?*
- The future of Canada's publicly funded health system
- Increasing stress on families
- The transition to the knowledge economy
- Changing beliefs about health
- The need to invest in the early years

Critical Issues — *What are the issues affecting the system?*
- Supply of health professionals
- Public expectations and demand
- Appropriate access to primary health services
- Personal health practices
- Aging population
- Disease prevention and management

Goals — *What do we want to achieve?*
- Improve the health status of Islanders
- Increase our acceptance of responsibility for our own health
- Improve sustainability of the system
- Improve public confidence in the system
- Improve workplace wellness and staff morale
- Maintain other results at current levels

Strategies — *How will we achieve our results?*
- Wellness
- Healthy child development
- Access to services
- Human resources
- Information technology
- Partnerships to address the determinants of health

Current Situation

The recent regionalization and integration of the health and social services system has attempted to increase efficiency, emphasize the broad range of factors that determine health, and bring the planning and delivery of services closer to Island communities to meet unique community needs. Regional health board members are now appointed and elected to ensure greater accountability and a strong community voice in the system.

Spending on health and social services has grown substantially in the past decade, from $250 million to $353 million. This rapid rate of growth is expected to continue if effective interventions are not made today to improve health, and control rising costs and demand.

During the past decade, several changes have occurred in acute services. The number of acute care hospital beds decreased by 30 percent in the period from 1992 to 1997. People are now admitted to hospital for births, surgery or treatment of serious illness, and many more patients are now treated successfully outside of hospital. Early discharge after birth is now the accepted norm, and new technology is reducing the need for inpatient services. For example, day surgeries at the Queen Elizabeth Hospital increased from 33 percent of all surgeries in 1988 to 53 percent in 1998. Cancer treatment services have been significantly enhanced in recent years, and new linear accelerator and MRI services are now being established.

Several indicators suggest the need for further improvements in acute care such as less expensive alternatives to hospital care and improved utilization. Prince Edward Island is well above the Canadian average in overall admissions to hospital, average length of stay, and rates of hospitalization for ambulatory sensitive conditions, such as pneumonia and influenza. Canadian Institute of Health Information data suggests that 9.4 percent of PEI hospital admissions are not required.

Significant progress has been made in recent years to improve the distribution of long term care beds in the province, and this has had a positive impact on wait lists and the ability of long term care residents to remain in their own communities. The average age of admission to long term care rose from 78 years in 1997 to 84 years in 2000. Compared to other provinces, the wait period for admission to long term care in PEI is low.

The system continues to strive for a better balance between the diagnosis and treatment of illness, health promotion, and disease prevention and management. New initiatives have been implemented to prevent and reduce health problems such as mammography screening programs, asthma and diabetes education programs.

Collaborative practice models have been tested successfully in family practice settings to support improved access to a broader range of health professionals, and enable Islanders to take more responsibility for their health. Several community health centres are now operating successfully throughout the province.

Partnerships with community coalitions to address the determinants of health are meeting with growing success. Recognizing that investments in the early years can have lifelong benefits for children and society, the system is leading the implementation of a provincial Healthy Child Development Strategy.

The number of people having to rely on social assistance is now the lowest in over 20 years, due largely to a strong economy and an increased focus on employment. Although several new programs have been introduced to support lower income working families with child-rearing costs, demand for those supports continues to increase, particularly for single women with children.

Employment opportunities have played a significant role in assisting Islanders to move from social assistance to financial independence, and such opportunities must continue to help people become more self-reliant. Although social assistance caseloads have decreased, demand continues to rise for supports for children, families, and persons with disabilities.

Substantial investments in the recruitment and retention of health professionals are producing positive results. Successful recruitment strategies promote PEI lifestyle opportunities, encourage Islanders working out of province to return home to practice, and incentives that encourage Island students to remain in the province to practice. A supply and demand analysis is now being conducted to enable the public and private health sectors to identify and plan for future health human resource needs.

A provincial health information system now connects all facilities, and most health professionals electronically. A provincial IT strategy is being implemented to provide the basis for evidence-based decision making, and the development of electronic health records and case management systems.

Significant work has begun to improve accountability within the system, such as the development of core program indicators to measure and report on client outcomes, access to services, cost effectiveness, and client and staff satisfaction with services.

These, and other initiatives reflect the significant progress made by the system in recent years to move from one that focussed primarily on the treatment of illness, to a system that strives to be sustainable, and accountable for performance, health outcomes, and progress to address the many factors that determine the health of Islanders.

Environment Scan

Many factors beyond the control of the provincial health and social services system influence the performance of the system and the health of the population. These environmental drivers may be addressed by the system if we anticipate and plan for them, rather than waiting to respond after the fact.

The future of Canada's publicly funded health care system

Canadians place great value in their health care system, and many believe that Medicare defines Canada as a nation. However, the challenge to find growing demand for health care is causing many to question the continued ability of the current publicly funded system to meet our needs, and to support the principles of the Canada Health Act which include public administration, comprehensiveness, universality, portability, and accessibility. There are growing expectations that free access to more services on demand is the right of every Canadian. As the debate continues, Canadians and their children will be pressed to decide whether they can afford, or even want, a publicly funded and publicly administered health system. This debate will undoubtedly place major pressure on governments, health care providers, and users of the system.

Increasing stress on families

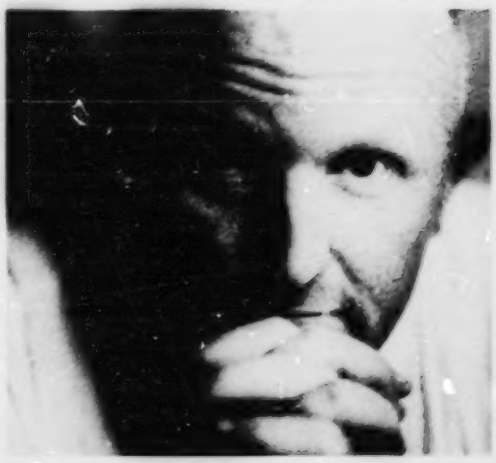
According to the Vanier Institute, about 16 percent of Canadian families are now lone-parent families, usually headed by the mother. More than half of lone-mother families report annual household incomes of less than $20,000, while less than one in 20 two-parent families report such low income levels. According to a 1999 survey, 83 percent of Island women in this situation reported they were either in poor health or had significant health problems. Most of these health problems were directly related to the stress arising from depending on such low incomes to provide for themselves and their children. Women and children living in poverty are at greater risk for poor health, and they need additional supports to have an equal chance at health.

In seven out of ten Canadian families, both parents work, and they are working longer hours to make ends meet. Today's hurried culture is placing increasing pressure on families to balance work and family life. With less time available for themselves and their families, they are feeling guilty and stressed. The "time famine" is most severe for working parents aged 25 to 44 who often have young children at home. Increased family stress levels often result in increased stress levels for women, the family caretakers.

Recognizing the impact that time stress can have on the health of individuals and the workplace, some European countries have recognized the issue as a systemic dilemma, and they have put policies in place to discourage a culture of overwork such as legislated 35-hour work weeks, tax incentives, and a variety of leaves to reduce and redistribute work time to meet the needs of people who are unemployed or under-employed. In Canada, employers are also becoming more attentive to work-family policies which respond to the time stresses experienced by working families.

The transition to the knowledge economy

We are now moving from an industrial economy where machines replaced human labour, to a knowledge economy where knowledge is the predominant factor in the creation of wealth. This major system change could affect the health system in several ways. For example, the social and economic implications of such major economic shifts have the potential to widen the gap between the rich and poor, and subsequently impact upon population health. As new technologies continue to support improvements in health and service delivery, their introduction can also add stress to the workplace by affecting employees' identity and sense of purpose. Genetic engineering advancements and the availability of new reproductive technologies will challenge existing societal beliefs about issues such as commercial surrogacy, the creation of human embryos for research purposes, and the use of prenatal screening for the purpose of sex selection or the elimination of disabilities. It is incumbent upon the health system to plan for new technologies and develop healthy work environments that facilitate the transition to the knowledge economy and the new opportunities it will provide.



Changing beliefs about health

Beliefs about health affect our progress to improve health, beginning with the present belief that health services are our primary response to illness. Conditions such as heart disease, cancer, diabetes, and mental illness are responsible for the vast majority of death and disability in Canada. Currently we rely almost exclusively on the provision of clinical care by highly trained professionals as the major strategy to deal with these conditions, although there is good evidence to suggest that many of these conditions can be prevented or delayed through social and lifestyle changes.

While drugs have a positive impact on health, many people are becoming increasingly reliant on them as a quick fix to such problems as reducing weight or lowering cholesterol, rather than making lifestyle changes. Advances in medical technology and fear of death by some people contribute to the belief that people should be kept alive at any cost whether it is an infant who will depend on massive supports throughout their lifetime, or an elderly person who is rescued but left with little or no quality of life.

While these beliefs are held by many Islanders, a growing number of people are seeing new possibilities, and they are embracing alternatives, such as complementary therapies and a wellness philosophy that encourages increased acceptance of responsibility for health and a balanced approach to reach their full health potential.

The need to invest in the early years

Much of our life is influenced by what happens to us in the early years. Research shows that the brain is most influenced during the period from infancy to three years, and experiences during this time determine how we cope and respond throughout life. At the same time, most of our health care resources are allocated to acute services used during the last few months and weeks of life. While these services are vital, it is important that resources are also available during critical developmental periods when they can support good health throughout the lifespan.

Critical Issues

The sustainability of the health and social services system depends on its ability to respond to changing needs and conditions. This section examines several factors influencing the internal capacity of the system to sustain quality and access to services.

Public expectations and demand

The demand for services is increasing in almost every area for a variety of reasons including population growth, the availability of new drugs and technology, and increasing public expectations. People are asking for more doctors, nurses, drugs, technology, family supports and complementary health services. They want to be able to access care in their own communities, and they are concerned about wait lists for services. Families often ask that their loved ones be kept alive at high cost, and cross-border shopping for health care is increasing. While rising expectations are creating pressure to increase spending on new drug therapies and acute care, they are severely limiting the ability of the system to innovate and shift resources to other areas of need.

Increasing public expectations of the system is a very critical issue. Demand alone cannot drive the system. The public must become more informed of reasonable access and the need for real changes in the way services are delivered, particularly in primary health services.

Supply of health professionals

Maintaining an adequate supply of workers is now one of the most critical issues facing the system, one that requires a concerted approach by governments, educators and professional associations. Recruitment and retention of skilled employees is expected to be a challenge throughout the labour market in coming years as we experience a major demographic shift. The effect of this trend is being felt first in the health sector which is

labour intensive and dependent on a specialized workforce, and particularly in less populated areas like Prince Edward Island. The supply of health professionals is now decreasing as the workforce ages, the number of people retiring increases, and the supply of available graduates declines. For example, it is expected that in the next ten years in PEI, 40 percent of the physician workforce and more than 200 nurses will retire from the public sector. To address this issue, the system must increase its focus on workplace wellness and human resource planning to ensure an adequate supply and the right mix of health professionals to meet changing needs.

Appropriate access to primary health services

There is growing evidence that investments in primary health services have a great impact on health and sustainability. Primary health services are those that people access first and most often, such as family physician services, public health nursing, screening programs, addiction services and community mental health services. There is much more opportunity at this point of contact with the system to assist people to prevent and manage health problems rather than after the onset of serious illness.

There is growing consensus that access to primary health services is improved when primary health care providers practice in teams, and refer the client to the most appropriate team member(s). Currently, many providers practice in isolation of each other, services are not well connected, and the skills of many providers are under-utilized. Primary health care models support an increased emphasis on disease prevention and management and referral to valuable community services such as Meals-On-Wheels or community support groups. Such models are becoming increasingly attractive to physicians and other health professionals who prefer to work collaboratively and without the pressures of independent practice.

Personal health practices

Individuals who understand and accept responsibility for health are more able to take control over and improve their health. For example, Islanders who choose a healthy lifestyle and access preventative health services like cancer screening, immunization and blood pressure clinics are more likely to live well longer.

People's capacity to accept responsibility for health is influenced by social and economic conditions, and comprehensive strategies are needed to address these conditions. For example, some Islanders must rely on social assistance or food banks to meet their family's basic needs. Employment opportunities are the best strategy to help clients move from social assistance to financial independence. It is critical that the health system increase its capacity to work with others to assist individuals, families and communities to accept responsibility for, and achieve good health.

Aging population

During the next three decades as the baby boomers age, we will experience the biggest demographic shift in history. It is expected that the proportion of the population aged 65 and over in Prince Edward Island will increase from 13 percent today to 15 percent in 2011, and to 27 percent in 2036. This will impact upon the health system in several ways. While seniors are living longer healthier lives than ever before, the incidence of diseases like cancer, heart disease, diabetes and dementia is still expected to increase. Demand is expected to rise for acute care, long term care, home care, mental health, geriatrician and other services. This issue becomes more critical when we consider that the health workforce will be aging at the same time, there will be fewer family members to support their aging parents, and the amount of resources required to sustain services for seniors could impact on other government services that support health. It is critical that the health system is prepared to meet these changing needs.

Disease Prevention and Management

Many diseases are preventable. For example, meningitis can be prevented through vaccines, and the spread of sexually transmitted diseases can be prevented through responsible sexual behaviour. Many chronic conditions are also preventable. Risk factors for cardiovascular disease and cancer can be reduced or eliminated through education and supports that result in a change in lifestyle.

The World Health Organization suggests that diabetes is rising at epidemic proportions worldwide. In Prince Edward Island, there were 17 new cases of diabetes diagnosed each month in the mid 1970's, compared to 60 cases per month today. There is clear and undisputable evidence that good blood sugar control can prevent or delay the onset of serious complications from diabetes such as heart disease, blindness and kidney disease, which have enormous human and financial costs. The prevalence of cancer and diabetes in this province is expected to increase significantly as the population ages.

There are now approximately 2000 Islanders over aged 50 with Chronic Obstructive Lung Disease (COPD). This figure does not include the many Islanders under the age of 50 with early stage disease that has not yet been diagnosed. The most staggering aspect of COPD is the economic burden it places on the health care system which can be impacted through education and home rehabilitation and oxygen programs, rather than expensive hospital care.

It is imperative that our system step up its efforts to assist Islanders to prevent, delay and manage chronic conditions.

GOAL #1

Improve the health status of Islanders

Improving the health status of Islanders is the first priority of the health and social services system. Good results in this area will reflect improved health and quality of life, as well as positive effects on the longer term sustainability of the system.

Indicators of Prince Edward Island health status compared to other provinces and territories*

- High levels of positive mental health
- High levels of social support
- Equitable income distribution
- Good air quality
- Low rates of sexually transmitted diseases
- Lower rates of breast cancer
- Low rates of underweight births
- Low child poverty rates
- Readiness to learn is comparable to other provinces

- Lowest rates of physical activity
- Highest male smoking rates
- Highest rate of cardiovascular death among males
- Lowest rates of blood pressure testing
- Low levels of education
- High rates of arthritis
- High levels of unemployment
- High alcohol consumption
- Highest exposure of children to second-hand smoke

* *Toward a Healthy Future: Second Report on the Health of Canadians*, Health Canada, 1999

Health status indicators provide us with a comprehensive picture of the overall health of Islanders, and how we compare in terms of life expectancy, disease, health behaviours, and the broad determinants of health.

Prince Edward Island is high in many areas of health status, and low in other areas. For example, we have high rates of positive mental health, the highest level of social supports in the country, excellent birth weight, and the lowest rates of child poverty in Canada At the same time, we have the lowest rates of physical activity, the highest male smoking rates, high unemployment, and low levels of education.

Islanders, like other Atlantic Canadians, are generally less healthy than people in the central and western provinces because they smoke more, drink more, exercise less, and carry more body weight. As a result, we have higher rates of chronic disease such as cancer, heart disease and diabetes.

Chronic disease is the major cause of death in Prince Edward Island, as well as potential years of life lost, hospitalization, and reduction in quality of life.

PEI has the highest rate of cardiovascular death among males in Canada. While the cancer rate in the province is similar to the Canadian average, cancer is the leading cause of potential years of life lost in the province. The prevalence of diabetes, COPD and depression among women are increasing at alarming rates.

Our primary opportunities to improve health status are in reducing the risk factors for chronic disease. This will be achieved through wellness initiatives to assist Islanders to develop knowledge, skills and supports to prevent, reduce and manage chronic conditions.

All Islanders do not have an equal chance to reach their full health potential, and other strategies are needed to address inequalities in population health status. Many Islanders such as single women with children have poor health status because they lack the supports to make healthy choices, usually because of their social and economic conditions. Partnerships will be strengthened and increased to address inequalities in the determinants of health such as assisting teen parents to stay in school, creating employment opportunities to help people move from social assistance to financial independence, and ensuring that all Island children receive a healthy start in life.

The comparatively low cost and large benefit of public health and population strategies are well recognized. An increased focus on this approach will have major benefits for health and quality of life, as well as the long term sustainability of the system.

Changes in health status will be measured and reported regularly based on defined health status indicators. We also need to increase public understanding that it often takes several years, or even generations, to document evidence of change in health status.

Traditionally, accountability in the health system has focussed on reporting outputs, or *what was done*. Measuring and reporting health status outcomes, or *what was achieved* will increase accountability, and provide information to all Islanders to set goals and targets to improve health.

How will we measure improvements in health status?

- Life expectancy
- Self-rated health
- Birth weight
- Prevalence of chronic disease
- Rate of vaccine preventable disease
- Smoking rates
- Physical activity rates
- Readiness to learn

How will we improve health status?

- Chronic disease prevention initiatives
- Tobacco reduction initiatives
- Cancer screening programs
- Healthy Child Development Strategy
- Diabetes Strategy
- Social supports for lower income families
- Promoting a wellness culture
- Increased access to primary health services
- Asthma education programs
- Literacy programs

GOAL #1

Improve the health status of Islanders

Improving the health status of Islanders is the first priority of the health and social services system. Good results in this area will reflect improved health and quality of life, as well as positive effects on the longer term sustainability of the system.

Health status indicators provide us with a comprehensive picture of the overall health of Islanders, and how we compare in terms of life expectancy, disease, health behaviours, and the broad determinants of health.

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Indicators of Prince Edward Island health status compared to other provinces and territories*

- High levels of positive mental health
- High levels of social support
- Equitable income distribution
- Good air quality
- Low rates of sexually transmitted diseases
- Lower rates of breast cancer
- Low rates of underweight births
- Low child poverty rates
- Readiness to learn is comparable to other provinces

- Lowest rates of physical activity
- Highest male smoking rates
- Highest rate of cardiovascular death among males
- Lowest rates of blood pressure testing
- Low levels of education
- High rates of arthritis
- High levels of unemployment
- High alcohol consumption
- Highest exposure of children to second-hand smoke

* *Toward a Healthy Future: Second Report on the Health of Canadians*, Health Canada, 1999

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GOAL #2

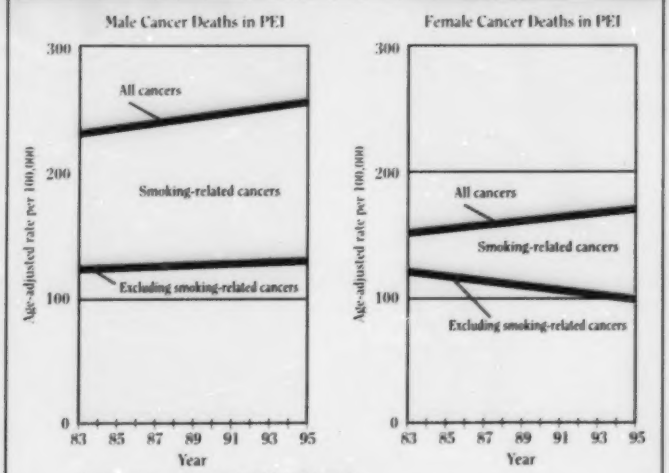
Increase our acceptance of responsibility for our own health

Increasing our acceptance of responsibility for our own health is essential to improve the health of Islanders, and the sustainability of the health system. Many major illnesses are preventable or manageable, yet many people rely solely on the health system to treat them after they become ill, or cannot meet their own needs.

Acceptance of responsibility for health will be increased through education programs; disease prevention and management programs; increased access to primary health services; increased access to health information; and partnerships to address the determinants of health.

Responsibility for health is shared among individuals, families, communities and other sectors. Each has a role to play in accepting responsibility and taking action to improve health. For example, individuals are responsible for their personal health practices. Families are responsible to care for young and older members, and support each other in times of need. Communities take responsibility for health by promoting healthy public policies and providing social and recreational opportunities. Businesses support the health of employees by providing safe and healthy workplaces. Governments accept responsibility for the health of citizens through crime prevention initiatives, school health, and programs to protect the environment.

PREVENTABLE



Source: Cancer Trends in PEI, 1983-1997

Many chronic conditions can be prevented or reduced through modifiable lifestyle factors. For example, lung cancer is the most common cause of cancer deaths among men and women, and 90 percent of lung cancers are caused by smoking. It is estimated that about half of cancer deaths in Prince Edward Island could be prevented by eliminating smoking and choosing diets that include more fibre, vegetables, fruit, and less fat.

Our high rate of cardiovascular disease is the predictable result of the highest male smoking rate in Canada, the lowest rate of physical activity, and the lowest rate of blood pressure testing in Canada. Many risk factors for cardiovascular disease can be reduced or eliminated by education or a change in lifestyle, such as maintaining a well-balanced diet, a healthy weight, exercising regularly, choosing not to smoke, and controlling stress.

Many chronic conditions can also be prevented, delayed or managed through access to appropriate primary health services. PEI has many successes to build on in this area such as diabetes and asthma education programs, and new addiction programs to reach people at earlier stages of their addictions.

The new Asthma Education Centre at the Queen Elizabeth Hospital is an excellent example of how primary health care providers can assist Islanders to increase acceptance of responsibility for their health and the health of their families. In the six months following the opening of the Centre, clients reported dramatic improvements in health, including an 80 percent reduction in regular visits to their family doctor; a 90 percent reduction in days in hospital; a 66 percent reduction in adult days lost from work; and an 80 percent reduction in days missed from school.

New addiction services, are now available in each health region to increase access to a range of services to treat alcohol, drug and nicotine addictions, as well as gambling problems. The new programs are meeting with initial success to assist Islanders to manage their addictions, prevent the onset of other illness, and become productive members of society.

New chronic disease management programs will be explored.

Access to health information will continue to provide people with information to prevent illness and better manage their health.

Partnerships with community coalitions and organizations will continue, to make healthy choices the easy choices in Island communities, for example, tobacco reduction strategies, active living initiatives, and strategies to promote breastfeeding as the cultural norm and ideal choice for infant feeding in Prince Edward Island.

How will we measure increased acceptance of responsibility for health?

- Children exposed to second hand smoke
- Participation in preventative health programs
- Immunization rates
- Mammography and pap screening rates
- Breastfeeding rates

How will we increase acceptance of responsibility for health?

- Implement social marketing programs to promote healthy lifestyles
- Promote healthy public policy
- Increase access to consumer health information
- Increase access to disease prevention, management and early detection programs
- Increase training and development for social assistance clients
- Increase access to primary health services

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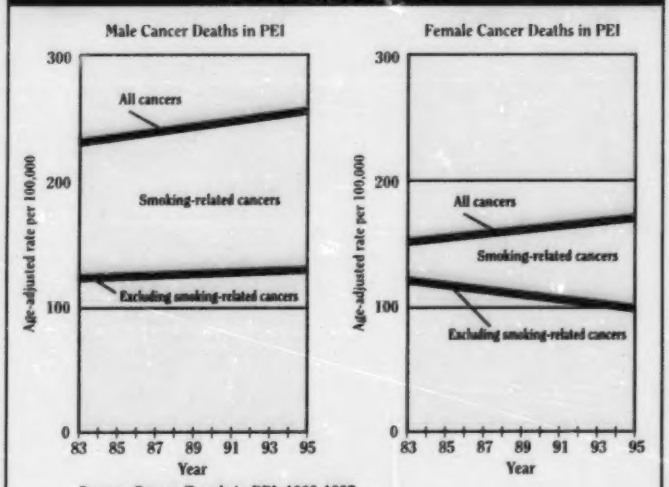

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GOAL #3

Improve the sustainability of the system

Several factors are placing increasing pressure on the system to maintain access, quality, and client satisfaction. These factors include increased demand for new and existing services; rising costs; a declining supply of health professionals; the need to make capital investments in health facilities; and public pressure to make costly new technologies available close to home.

PEI Health Care Spending 1996 - 2001

Physician Services	+ 20%
Drug Programs	+ 59%
Hospital Costs	+ 18%
Home Care	+ 40%
Ambulance Services	+ 75%
Blood Services	+ 84%
Government Manors	+ 22%
Private Nursing Homes	+ 69%

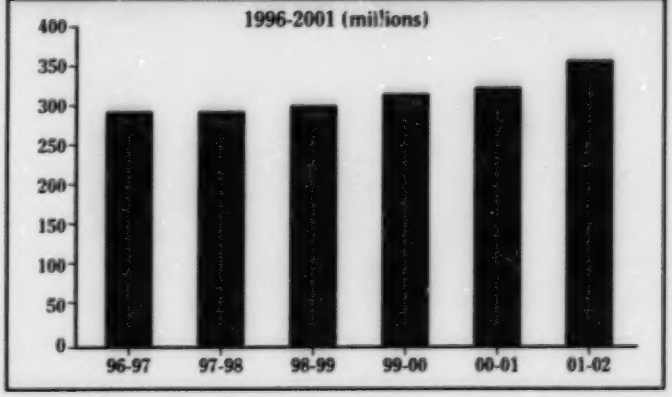
The rapid rate of growth in health spending in recent years is causing growing concern about our ability to sustain escalating costs, and whether our publicly funded health system will continue to be affordable. In the past five years, spending on health and social services in Prince Edward Island grew from $285 million annually to an estimated $353 million in 2001-2002, an increase of 19 percent. The cost of delivering services is expected to continue to increase in coming years.

Health spending now represents 42 percent of total provincial government program expenditures. The continued growth of health spending at a rate higher than provincial growth domestic product can limit our ability to pay for health services, and has the potential to crowd out spending on other valued government services that also promote health and well being, such as education, economic development and tax relief.

Without effective interventions today to increase sustainability, we are also concerned about the ability of our health system to continue to support equity, access, and the core values of Medicare.

Our greatest opportunities to improve sustainability are to improve health and reduce reliance on the system through the continued promotion of wellness, disease prevention and management, and population health strategies.

PEI Public Sector Health and Social Services Expenditures



Sustainability will also be addressed through improved access to primary health services. There is growing recognition that investments in primary health services have a far greater impact on performance and outcomes than providing expensive care to people after they become seriously ill or disabled.

Other strategies will also be deployed to improve utilization and efficiency, including the examination of hospital bed utilization and the exploration of alternate, less expensive and more appropriate care for people who do not require acute services.

Recognizing that more money is spent on prescription drugs per capita in Prince Edward Island than in any other province, drug prescribing practices, drug utilization and access to provincial drug programs will be examined to ensure that they are appropriate.

The delivery of primary health services will continue to be enhanced within family practice and other settings to increase appropriate access to health care providers and maximize skills and resources.

Systems will be examined to increase efficiency and eliminate unnecessary procedures.

The introduction of costly new drug therapies and technologies will be evaluated carefully to ensure that expenditures in this area produce benefits that justify high costs.

Recruitment and retention strategies will continue, to ensure we have an adequate supply and an appropriate mix of health professionals to meet changing needs.

Recognizing that continuing to add money to the system as the major strategy to address pressures is no longer an option, there will be increasing emphasis on resource reallocation to address areas of need.

Underlying the achievement of this goal will be our ability to remain accountable to service providers and the public by measuring and reporting performance and outcomes that indicate positive impacts on health and sustainablity.

How will we measure increased sustainability?

- Public health expenditures
- Health expenditures per capita
- Health professionals as a percentage of population served
- Client satisfaction with services

How will we improve sustainability?

- Wellness, disease prevention and management, early detection and intervention programs
- Population health strategies
- Increased access to primary health services
- Improved acute care utilization
- Improved drug program utilization
- Careful evaluation of the introduction of new drug therapies and technologies
- Improved utilization and efficiency
- Reallocation of resources to areas of greatest need

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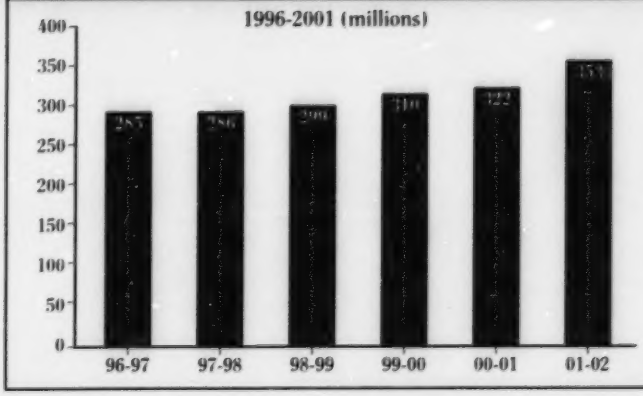

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GOAL #4

Increase public confidence in the system

Public confidence in the system is essential to advance system goals and strategies.

How will we measure increased public confidence?

- Overall public confidence
- Employee satisfaction with service quality and access
- Physician satisfaction with service quality and access

Public confidence in the system has decreased in recent years, due mainly to negative perceptions about system reforms, cuts, and shortages. Because the health system is very large and complex, people find it difficult to understand. Islanders value health and social services highly. However, without evidence and a sound understanding of what works and what does not, we often resist change and choose to maintain the status quo.

While health and social services consume the largest part of the provincial budget and far exceed expenditures in any other area, this amount of money does not seem to be enough and the long term sustainability of the system is now being questioned in PEI, and across the country. Yet, our response to pressures on the system continues to be to add even more volume to the system through more doctors, more nurses, more social services, more technology, and more money.

How will we increase public confidence in the system?

- Provide regular reports to the public on system performance, health status, and progress to address the determinants of health
- Ensure system-wide staff and stakeholder involvement in strategic planning, and support of goals and strategies

It is essential that the system assist the public to become more informed of system performance and outcomes, how tax dollars are spent, and whether value for money is being achieved. Islanders can then play a greater role in shaping priorities and improving the allocation of resources.

This will be accomplished by measuring and regularly reporting indicators of health status, progress to address the determinants of health and system performance using several indicators such as service quality, access to services, and cost effectiveness. While public confidence in the system has eroded in recent years, client satisfaction with services remains high. Individuals' ratings seem to be influenced by negative media reports when their own experience with the system is limited.

Improving public confidence must also involve improving the confidence of employees, physicians and stakeholder groups. The 4,000 employees of the system work hard, and need to know that their work is valued by the people they serve. They are an important interface between the system and the public, and they have a powerful role in determining public opinion and confidence in the system. While employees are familiar with their own areas of service, many lack understanding of the many other services provided by the system, and how they work together to promote health. It is essential that they understand and support the broad directions set out in this strategic plan.

Improve workplace wellness and staff morale

GOAL #5

Recognizing that the delivery of sustainable quality services is largely dependent on a healthy skilled workforce recruitment, retention, and employee wellness will be a major priority.

The system will promote a culture of wellness and learning that values personal responsibility, positive personal health practices, safe and positive workplaces, ongoing education, leadership development, and respect and recognition for the contributions employees make to the health and well being of Islanders.

We will implement a comprehensive workplace wellness program to achieve these objectives, with a view to enabling employees to feel better able to handle their work, access educational opportunities, and balance work and family responsibilities.

Ensuring adequate numbers of staff to meet client needs is key to employee wellness and satisfaction. Comprehensive labour market information and sound human resource planning will enhance public and private sector capacity to plan for, and meet future needs.

Primary health service providers will be supported to maximize their skills and contributions to primary health care teams.

How will we measure increased workplace wellness and staff morale?

- Employee satisfaction
- Physician satisfaction
- Leave usage
- Numbers and length of WCB and LTD claims
- Employee exit survey trends
- Recruitment success
- Attrition rates
- EAP utilization rates

How will we improve workplace wellness and staff morale?

- Implement effective recruitment and retention strategies
- Implement effective human resource planning and management programs
- Encourage young Islanders to consider careers in health and social services
- Provide employees and physicians with opportunities to maintain and upgrade skills
- Foster supportive work environments and improve work life balance
- Enhance workplace safety
- Explore opportunities to expand scope of practice to increase job satisfaction and maximize skills and resources

Maintain other results at current levels

GOAL #6

The goals identified in this plan indicate those areas where we want to significantly improve our results. They are not intended to indicate all that we will do. Other results will be maintained at current levels.

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STRATEGIES

Wellness

Wellness is a holistic philosophy, that encourages people to reach and maintain their full health potential – physically, mentally, emotionally and spiritually. Wellness initiatives will focus on disease prevention; the promotion of health lifestyles; personal responsibility to preserve health and make healthy choices; healthy communities; and services that assist individuals to manage health conditions effectively. By promoting wellness at all ages, and recognizing successes, individuals, families, communities and other sectors will be engaged in efforts to improve the health and well being of Islanders.

Health Promotion and Illness Prevention
In partnership with other sectors, develop and implement a five-year plan to establish community-based initiatives in each health region to reduce risk factors for chronic illness such as cardiovascular disease, cancer, Type 2 diabetes, and chronic lung disease including asthma and bronchitis. With the goal to make healthy living the norm, specific objectives are to provide baseline data on behaviours, attitudes and knowledge of risk behaviours for chronic disease. We will promote active living, healthy eating and tobacco reduction by creating supportive environments for change.

Tobacco Reduction
Continue to work with the PEI Tobacco Reduction Alliance to prevent tobacco use among Island youth; encourage and help smokers to quit; and protect the public by promoting healthy environments and eliminating exposure to second-hand smoke.

Wellness for Seniors
In consultation with the Seniors Advisory Council and other seniors organizations, we will identify a comprehensive set of indicators for the health and well being of Island seniors. This will form the basis for a Prince Edward Island Strategy on Aging which will address seniors issues such as physician services, housing, transportation, home care and medications.

Healthy Public Policy
Increase recognition by federal, provincial and municipal government sectors, businesses and community organizations of the determinants of health and the impact that public policy and community action can have on wellness.

Wellness Recognition
Increase public and employee understanding and support of wellness by recognizing individual, community and workplace wellness initiatives promoting good physical and mental health.

Supports for Low Income Families
Recognizing the relationship between chronically low incomes and family health and well being, we will ensure that health and social services are available to support individuals and families requiring assistance to live independently and take more control of their future.

STRATEGIES

Healthy child development

The health and social services system will lead the implementation of a provincial Healthy Child Development Strategy to improve outcomes for children in health, behavioural and emotional development and readiness to learn. Working with other departments of government and the community, our actions will respond to current research which suggests how children learn, behave, form relationships, and enjoy good health in later life is very dependent on how they are nurtured in the prenatal period and very early years. We will work with families, communities, non-government organizations, and other sectors to promote healthy public policy for children and meet our collective responsibility for children's health and well being.

Healthy Child Development Strategy
Lead the implementation of a provincial Healthy Child Development Strategy in partnership with other government departments, families, and the community. Establish a Premier's Council on Healthy Child Development and a Children's Secretariat to increase public understanding and coordinate development of a multi-sector workplan in support of Island children.

Children's Mental Health
To complement the ongoing work of community mental health clinicians, we will improve children's mental health by ensuring that preventative programs, mechanisms to identify children at risk and early intervention strategies are in place throughout the province.

Child Protection
Improve and clarify PEI's child protection response to create better outcomes for children in need of protection, and children under the care of the province.

Provincial Autism Strategy
In collaboration with the Ministry of Education and autism support groups, develop and implement an integrated Provincial Autism Strategy, based on intensive early interventions. Specialized resources and in-home supports appropriate to the individual child will be key aspects of this strategy, designed to improve outcomes for these children.

Healthy Start Programs
Utilize Public Health Nursing and community-based partnerships to enhance screening of newborns and support for families desiring parenting and coping interventions.

Speech Language Services
Implement new community-based initiatives to broaden the availability of speech language services to children.

Support for Teen Parents
Improve life outcomes for teen parents and their children by providing in partnership with the Education system, supports and guidance to encourage teen parents to complete their education.

Adoption of Children with Special Needs
Provide greater capacity for families to ensure that children with special needs have permanency and ongoing lifelong relationships by becoming adopted by their care family.

Encourage Breastfeeding
In partnership with the PEI Breastfeeding Coalition, implement initiatives to promote breastfeeding as the cultural norm and the ideal choice for infant feeding in the province.

STRATEGIES

Access to services

Improving access to services involves improving the way services are organized, how people are referred to services, and how people work together to deliver them. It also means reducing inappropriate use of services which can undermine the financial sustainability of the system; increasing the availability of services in the province to provide services closer to home; and redesigning primary health services in the system and community to improve the quality and impact of services on citizens' health and reduced reliance on more expensive and less appropriate services. Underlying the success of this strategy is our ability as a health system to embrace innovation in service delivery to both increase the impact of our services on the health and well being of citizens and to improve the quality of those services. In this context, quality relates to the timeliness, reliability, accuracy, quantity, relevance and courtesy of the service.

Home Care
Increase the availability of home care services to improve quality of life for Islanders wishing to remain at home, and their caregivers to support persons with chronic illness, and to provide alternate services to more expensive hospital care.

Mental Health
Implement a new delivery model for mental health services which will provide enhanced preventative, specialized and crisis-response services through mental health teams that include mental health professionals, psychiatrists, and expanded roles for family physicians.

Palliative Care
Design and implement an integrated palliative care service delivery model which allows palliative care patients and families to choose between home, hospital or other settings for appropriate palliative care support. The model will be supported by enhanced training for professional and non-professional care providers, the use of new technologies and coordination with community palliative care organizations.

Disability Supports
Provide supports for persons with physical or intellectual disabilities through a new Disability Supports Program. The program will provide disability specific supports based on the assessed needs of the individual and/or family as a result of the disability. This will remove disincentives to work and earn income where possible, while supporting a more independent quality of life.

Diagnostic Services
Establish Magnetic Resonance Imaging (MRI) services in Prince Edward Island to provide early detection and diagnoses of medical problems. Improve outcomes for cancer patients through early detection initiatives, including mammography and cervical cancer screening programs, and enhanced prostate cancer diagnosis through a transrectal ultrasound service.

Cancer Treatment
Establish a Linear Accelerator service at the PEI Cancer Treatment Centre to enhance service quality, improve access to cancer treatment in the province, and reduce financial and emotional stress on patients and families.

Primary Health Care Redesign
Work with physicians, nurses and other health professionals to design and implement integrated, collaborative practice models of primary health care within family practice settings to increase access to a broad range of health professionals.

Acute Care
Continue to monitor and improve appropriate utilization of hospital services.

Provincial Drug Programs
Participate in new regional drug review initiatives that support faster listing of generic drugs and more timely reviews.

French Language Services
In accordance with the French Language Services Act, expand access to services in both English and French as appropriate.

STRATEGIES

Human resources

Recognizing that staff are the most important element in the planning and delivery of quality health and social services, we will focus our attention on workplace wellness. In acknowledgement of the important role of the workplace in supporting the health and well being of employees and associated health professionals, a comprehensive approach to workplace wellness will be implemented to support organizational excellence at all levels, through: clear roles and responsibilities; staff involvement in decision-making; recognition of the value of employees and their work; a focus on results; and opportunities for individual growth and development.

Workplace Wellness

A comprehensive approach to improve workplace wellness will be implemented, beginning with the development of a wellness needs assessment and a workplace health profile to guide the development of specific workplace initiatives.

Human Resource Supply and Demand Analysis

In partnership with the private sector, a supply and demand analysis will be conducted to develop a complete profile of the health and social services sector labour force in PEI; information on future human resource requirements; a model to project future human resource needs; and a synopsis of challenges in the recruitment and retention of professionals.

Human Resource Planning

A comprehensive human resource planning process will be implemented to ensure an adequate supply and the right mix of health and social services professionals who are appropriately educated, distributed and deployed to meet the health needs of Islanders. The plan will enable the system to assess current resources, future needs, and identify current and future skill gaps. Human resource plans will include recruitment, retention and succession plans; enhanced training and development programs; reward and recognition programs; modern performance appraisal systems; and leadership development initiatives.

Recruitment Initiatives
Continue to implement recruitment initiatives that encourage young Islanders to consider a career in health and social services; attract Island students and Islanders working away to return home to practice; recruit other professionals to the province through the promotion of lifestyle and professional opportunities.

Physician Practice and Payment Options
Successful recruitment and retention of physicians will require innovation and flexibility in managing workloads, work life, models of practice and compensation. We will work with physician groups to establish options which both address physician work life issues and increase the effectiveness of our medical professionals in improving the health of Islanders.

Advanced Practice Nursing and Nursing Research
Advanced practice nursing opportunities in the province will be explored in partnership with professional associations. Opportunities for increased nursing involvement in health services research will also be considered as a means of improving health services and expanding academic training and development opportunities for the nursing profession in the province.

STRATEGIES

Health information technology

The availability of accurate and reliable health information assists Islanders to take more control over and improve their health. The provision of timely, accurate information to health care providers also improves the quality of services provided to Prince Edward Island residents. The provincial Health Information Technology Strategy outlines our direction for planning, implementing, and managing information and technology requirements to enhance health status, to improve service delivery, and to provide information for planning, evaluation and research.

Consumer Health Information
Increase access to accurate and reliable consumer health information to assist Islanders in making more informed choices about their health and the health of their families. This initiative will build on the success of the Health Information Resource Centre (HIRC) and related services.

Information for Health Professionals
Strengthen and integrate service delivery by connecting employees and physicians electronically, establishing a common client registry, and electronic health records that support clinical systems and electronic case management systems for social services and health services.

Improved Service Quality
The utilization of new communications technologies and information management systems will allow for improved service quality for citizens: timeliness of service and reports; reliable diagnosis and therapies; adequate information and follow up; improved cost effectiveness; and improved access to service.

Telehealth
Explore the introduction of telehealth opportunities to enhance access and service quality, including digital radiology imaging, video-conferencing and telephone triage.

Privacy and Confidentiality
As a fundamental underpinning of our Health Information System we will ensure that policies, procedures and regulations are in place to protect individual privacy and the confidentiality of personal health information.

Partnerships to address the determinants of health

STRATEGIES

Recognizing the limited ability of the health and social services system to improve health and well being in isolation, our emphasis will be on the development and strengthening of partnerships to achieve positive impacts on the health and well being of Islanders. As a province, we will work together to enhance the positive impact of factors such as education, social support, physical environments, and adequate income on health and well being. Through increased collaboration with the private sector, non-government organizations and communities, we will foster a wellness culture and provide resources to build community capacity to support healthy living.

Provincial Government Sectors
Increase partnerships with other government departments and agencies to build awareness of the health impacts of public policy; and increase acceptance of responsibility for the health of our population.

National and Regional
Partnerships with the federal government will be strengthened to ensure that all governments share appropriately in the cost of health care. Collaboration within the Atlantic Region will continue to increase coordination and improve our effectiveness to address common priorities such as human resources, drug programs, health research, womens' health, illness prevention and public health issues.

Community and Private Sector
Increase partnerships with communities to support citizens to develop healthy lifestyles, and engage the private sector in implementing effective workplace wellness initiatives.

Active Living
Work with the Active Living Alliance to increase physical activity, reduce obesity and promote an active living culture in Island communities.

Health Research
Build and strengthen partnerships to increase Prince Edward Island's capacity to do health research, and to integrate evidence into policy and practice.

Professional Associations
Work in partnership with professional associations to review roles and responsibilities and maximize the use of knowledge and skills of health professionals.

Conclusion

This is Prince Edward Island's first experience in developing such a comprehensive strategic plan for our provincial system of health and social services. We are enthusiastic about the benefits of this coordinated system-wide approach, especially when combined with our integrated system of services, our small size as a province, and the great value that Islanders place in good health and well being.

We acknowledge with appreciation the contribution of the many people who helped develop this plan, and we look forward to the opportunity now to work in partnership to implement the strategies identified.

We are committed to reporting our progress, and to making needed adjustments as initiatives are implemented.